# Healthy Vermonters 2020 Goals Related to Asthma

- 1. Reduce hospitalization rates for asthma in both adults and children
- Increase the percentage of adults and children with asthma who receive a written Asthma Action Plan from their health care provider
- 3. Reduce exposure to second hand smoke
- 4. Reduce exposure to environmental triggers in the home, work, and school environment

# Asthma Program Goals - Vermont State Asthma Plan 2013-2018

- Ensure proper diagnosis and treatment of asthma patients using National Asthma Education Prevention Program (NAEPP) guidelines
- Pursue sustained efforts to incorporate asthma care into the forefront of state and national health care reform
- 3. Adopt reimbursement strategies for health care systems that lead to optimal asthma care
- 4. Improve both indoor and outdoor air quality for all Vermonters
- Engage Vermonters with asthma, their families, and other caregivers in appropriate selfmanagement

Current Asthma Prevalence 1	Baseline 2010	Status 2013
Adult Vermonters	11.1%	11.3%
Adults (U.S. average)	8.6%	9.0%
Vermont females	14%	14%
Vermont males	8%	8%
Vermont adults with less than high school education	16%	20%
Vermont adults with low household income (<125% FPL)	15%	19%
Vermont adults who are unable to work	23%	29%
Vermont adult smokers	16%	16%
Vermont youth (0-17 years of age)	10.0%	11.5%
Youth (U.S. average)	8.4%	9.3%

Comorbidities, Risk Factors, and Triggers	Baseline	Status	Goal
	2010	2013	2018
Adults with asthma who are obese <sup>1</sup> ‡ Adults with asthma who smoke <sup>1</sup> ‡ Adults with asthma that is exacerbated by current job <sup>2</sup>	35%	35%	30%
	21%	24%	17%
	27%	32%	
Adults with asthma exposed to second hand smoke <sup>2</sup> Youth with asthma exposed to second hand smoke <sup>2</sup>	15%	9%	13%
	4% ª	n/a	3%
Adults with current asthma with indoor pets <sup>2</sup> Youth with current asthma with indoor pets <sup>2</sup>	78% 86%	82% n/a	
Adults with asthma exposed to 4 or more triggers at home <sup>2</sup> Youth with asthma exposed to 4 or more triggers at home <sup>2</sup>	43%	38%	39%
	32%	n/a	32%

Asthma Care and Treatment	Baseline	Status	Goal
	2010	2013	2018
People with asthma who have had a routine asthma visit with their health care provider in the past 12 months <sup>2</sup>			
Adults	50%	47%	58%
Youth	76%	n/a	78%
People with asthma who have written Asthma Action Plans $^2$ Adults $\ddagger$ $^{\rm HV}$ Youth $^{\rm HV}$	31%	30%	36%
	48%	n/a	65%
People with asthma advised to change things in home, school or work environments <sup>2</sup> Adults ‡ HV Youth HV	35%	33%	45%
	33%	n/a	50%
People with asthma who had a flu vaccination in the past year Adults <sup>1</sup> Youth <sup>2</sup>	54%	51%	60%
	76%	n/a	80%
Adults with asthma who have had a pneumonia vaccination <sup>1</sup>	42%	47%	47%
People with asthma who have taken an Asthma Management Course <sup>2</sup> Adults Youth	9% 4% ª	5% n/a	 
People with asthma taught to recognize early symptoms <sup>2</sup> Adults Youth	67%	69%	
	86%	n/a	
Asthma Related ED Visits and Hospitalizations	Baseline	Status	Goal
	2008	2009	2018
Asthma emergency department visits 3 (rate per 10.000):	39.6	40.6	

Asthma Related ED Visits and Hospitalizations	Baseline 2008	Status 2009	Goal 2018
Asthma emergency department visits <sup>3</sup> (rate per 10,000):	39.6	40.6	
Children age <5	72.3	68.4	
People age 5-64	41.8	42.7	
Adults age 65+	14.7	18.9	
Boys age < 15	62.3	63.3	57.0
Women age 15-44	71.0	76.9	69.2
Men age 15-44	40.3	41.4	37.2
Asthma hospitalizations (rate per 10,000):	5.8	6.7	
Children age <5 HV	13.3	19.1	14.0
People age 5-64 ‡ HV	4.2	4.9	4.2
Adults age 65+ ‡ HV	11.5	11.8	10.1
Boys age <15	9.8	11.3	10.2
Women age 15-44	4.8	6.8	6.1
Number of deaths due to Asthma in Vermont <sup>4</sup>	11 <sup>b</sup>	7 °	0

Notes: n/a=data not yet available

<sup>+</sup> Data are age adjusted to the U.S. 2000 standard population

<sup>\*\*\*</sup> Values too small to report



### **Data Sources:**

- Behavioral Risk Factor Surveillance System (BRFSS), Vermont and U.S. (2010 and 2013 data)
- Asthma Call Back Survey (ACBS), Adult (2010 and 2013 data) and Child (2010 data, except as noted: <sup>a</sup> = 2008-2010 data)
- 3. Vermont Uniform Hospital Discharge Data Set (VUHDDS, 2008 and 2009 data)
- 4. Vermont Vital Statistics System (b = 2010 data, c = 2011 data)

§ The Behavioral Risk Factor Surveillance System (BRFSS) survey methodology changed in 2011. As a result, caution must be used when comparing data from 2011 to prior years.

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# Vermont Asthma Goal Tracker

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